P-1040	2002 City of Pa Mail this return to THE CITY OF F 94734, Cleveland, OH 44101-4734	IF YOU MOVED OR HAD ANY CHANGE IN STATUS DURING 2002, THIS BLOCK MUST BE COMPLETED. Date moved into Parma Previous Address Date moved out of Parma Present Address				
ь.	after the close of a fiscal year or p					
	PARMA ACCOUNT NO.			If retired, give dateOther Status Change & Date		
	Filing Status: Individual	Joint Corporation	Partnership			:
	Your Social Securi					rity Number
	Spouse's Social Sec					curity Number
	☐ Filing for 2002 calenda					•
ŀ	CAUTION: A copy of all W-2 Forms MIST be attached. CAUTION: A copy of all W-2 Forms MIST be attached.					
	1. WAGES AND COMPENSATION (F	COLUMN 1A	COLUMN 1B	be attached. COLUMN 1C	COLUMN 1D	COLUMN 1E
	LIST EACH WORK CITY	Total Wages	Withheld for	Withhold for	% of Col. 1A	Lesser of
	LIST LACTI WORK OFF	(As shown on W-2 Form)	Parma \$	Other Cities	See Instructions	Column 1C or 1D
		*		•	•	*
	COLUMN TOTAL	S Post (To Line 2)	\$ Post (To Line 9b)			\$ Post (To Line 9c)
HERE	4) TOTAL INCOME (TOTAL OF LINE 2 AND LINE 3)					4 \$
	8) PARMA CITY TAX, 2%. MULTIPLY TOTAL OF LINE 7 BY 2% 9A) ESTIMATED PAYMENTS AND PRIOR YEAR CREDIT. 9B) WITHHELD FOR PARMA (FROM 1B). 9C) CREDIT FOR OTHER CITIES (FROM 1E). 9D) DIRECT PAYMENTS TO OTHER CITIES (SEE INSTRUCTIONS) 9E) TOTAL PAYMENTS AND CREDITS (ADD LINES 9A THROUGH 9D). 10) TAX DUE, LINE 8 LESS LINE 9E 1F OVERPAID SEE INSTRUCTIONS 11) PENALTY AND INTEREST. 11A PENALTY \$					8 \$
1						

Signature of Person Preparing, if Other Than Taxpayer

109473M

Name and Address of Firm Signature of Spouse if Joint Return Phone Date

Signature of Taxpayer or Agent (Required)

Date